

County: Shawano
MAPLE LANE HEALTH CARE CENTER
N4231 STATE HIGHWAY 22

Facility ID: 5350

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SHAWANO 54166 Phone: (715) 526-3158
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/01): 78
Total Licensed Bed Capacity (12/31/01): 78
Number of Residents on 12/31/01: 72

Ownership:
Highest Level License:
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? No
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 74

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)			
		Primary Diagnosis		Age Groups		Less Than 1 Year			
Home Health Care	No							19.4	
Supp. Home Care-Personal Care	No							34.7	
Supp. Home Care-Household Services	No	Developmental Disabilities		Under 65		1 - 4 Years		45.8	
Day Services	No	Mental Illness (Org. /Psy)		65 - 74		More Than 4 Years			
Respite Care	No	Mental Illness (Other)		75 - 84				100.0	
Adult Day Care	No	Alcohol & Other Drug Abuse		85 - 94					
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic		95 & Over					
Congregate Meals	No	Cancer							
Home Delivered Meals	No	Fractures							
Other Meals	No	Cardiovascular		65 & Over					
Transportation	No	Cerebrovascular							
Referral Service	No	Diabetes		Sex					
Other Services	No	Respiratory							
Provide Day Programming for Mentally Ill	No	Other Medical Conditions		Male					
Provide Day Programming for Developmentally Disabled	No			Female					

Method of Reimbursement

	Medi care (Title 18)			Medi caid (Title 19)			Other		Private Pay			Family Care			Managed Care					
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	Total Resi - dents	% Of All
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	52	88.1	103	0	0.0	0	13	100.0	115	0	0.0	0	0	0.0	0	65	90.3
Intermediate	---	---	---	7	11.9	86	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	7	9.7
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		59	100.0		0	0.0		13	100.0		0	0.0		0	0.0		72	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	4.8	Daily Living (ADL)	Independent			
Private Home/With Home Health	9.5	Bathing	9.7	62.5	27.8	72
Other Nursing Homes	66.7	Dressing	19.4	61.1	19.4	72
Acute Care Hospitals	4.8	Transferring	36.1	43.1	20.8	72
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	23.6	50.0	26.4	72
Rehabilitation Hospitals	0.0	Eating	72.2	15.3	12.5	72
Other Locations	14.3	*****				
Total Number of Admissions	21	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	1.4	Receiving Respiratory Care		2.8
Private Home/No Home Health	4.8	Occ/Freq. Incontinent of Bladder	55.6	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	27.8	Receiving Suctioning		1.4
Other Nursing Homes	14.3			Receiving Ostomy Care		1.4
Acute Care Hospitals	0.0	Mobility		Receiving Tube Feeding		1.4
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	29.2	Receiving Mechanically Altered Diets		69.4
Rehabilitation Hospitals	0.0					
Other Locations	4.8	Skin Care		Other Resident Characteristics		
Deaths	76.2	With Pressure Sores	5.6	Have Advance Directives		94.4
Total Number of Discharges		With Rashes	6.9	Medications		
(Including Deaths)	21			Receiving Psychoactive Drugs		76.4

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Government Peer Group % Ratio	Bed Size: 50-99 Peer Group % Ratio	Licensure: Skilled Peer Group % Ratio	All Facilities % Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	94.9	87.7 1.08	85.1 1.11	84.4 1.12	84.6 1.12
Current Residents from In-County	80.6	76.7 1.05	72.2 1.12	75.4 1.07	77.0 1.05
Admissions from In-County, Still Residing	57.1	28.2 2.03	20.8 2.74	22.1 2.58	20.8 2.75
Admissions/Average Daily Census	28.4	91.3 0.31	111.7 0.25	118.1 0.24	128.9 0.22
Discharges/Average Daily Census	28.4	92.8 0.31	112.2 0.25	118.3 0.24	130.0 0.22
Discharges To Private Residence/Average Daily Census	1.4	32.9 0.04	42.8 0.03	46.1 0.03	52.8 0.03
Residents Receiving Skilled Care	90.3	90.8 0.99	91.3 0.99	91.6 0.99	85.3 1.06
Residents Aged 65 and Older	86.1	88.8 0.97	93.6 0.92	94.2 0.91	87.5 0.98
Title 19 (Medicaid) Funded Residents	81.9	67.9 1.21	67.0 1.22	69.7 1.18	68.7 1.19
Private Pay Funded Residents	18.1	19.7 0.91	23.5 0.77	21.2 0.85	22.0 0.82
Developmentally Disabled Residents	0.0	0.8 0.00	0.9 0.00	0.8 0.00	7.6 0.00
Mentally Ill Residents	90.3	46.1 1.96	41.0 2.20	39.5 2.29	33.8 2.67
General Medical Service Residents	5.6	14.8 0.37	16.1 0.35	16.2 0.34	19.4 0.29
Impaired ADL (Mean)	45.0	49.7 0.90	48.7 0.92	48.5 0.93	49.3 0.91
Psychological Problems	76.4	56.1 1.36	50.2 1.52	50.0 1.53	51.9 1.47
Nursing Care Required (Mean)	11.1	6.7 1.66	7.3 1.53	7.0 1.58	7.3 1.51